

Inspection Report

South Dakota Cosmetology Commission
500 E Capitol Ave Pierre, SD 57501
605-773-6193 cosmetology@state.sd.us

A.
SALON OR BOOTH NAME: Vera Cline Salon
ADDRESS: 2210 S Ridge Rd. CITY: Rapid City
OWNER NAME: Vera Cline TELEPHONE NUMBER: _____
SALON or BOOTH LICENSE NUMBER: CS-01173-2018 EXPIRATION DATE: 3-7-2018

B. TYPE OF SALON: 1. Salon Booth Rental Home Limited
TYPE OF INSPECTION: 2. Cosmetology (all) Hair Esthetics Nails Other _____
3. New Routine Re-Inspection Investigation

C. During all working hours. YES is satisfactory NO is NOT satisfactory SDCL 36-15 ARSD 20:42

- YES NO 1. Current licenses; Rules/Regulations, Unregulated Services Sign – Displayed _____
YES NO 2. Certified for microdermabrasion and/or electric nail files and/or eyelash extensions _____
YES NO 3. Fire Extinguisher, ABC type, 5 lbs., easily accessible, charged _____
YES NO 4. First aid kit that contains adhesive dressings, gloves, antiseptic, gauze, tape, blood spill procedures _____
YES NO 5. Disinfecting agent(s) available at station _____
YES NO 6. Disinfecting agent meets virucidal, fungicidal, and bactericidal requirements _____
YES NO 7. Disinfectant container available (large enough) _____
YES NO 8. Disinfectant (if mixed) fresh, clean and free from contaminants _____
YES NO 9. Clean closed containers - to store only cleaned or disinfected tools _____
YES NO 10. Closed, labeled containers for soiled towels, linens, tools _____
YES NO 11. Pedicure station and tools clean and disinfected after each use _____

YES NO 12. Floors clean (no hair or nail clippings) and in good repair _____
YES NO 13. Walls, ceilings, fixtures, vents clean and in good repair _____
YES NO 14. Plumbing, hot/cold running water and central sewage system _____
YES NO 15. Electrical, appliance cords and outlets safe and in good repair _____
YES NO 16. Ventilation in work area _____
YES NO 17. Restroom, clean with disposable towels, liquid soap _____
YES NO 18. Storage room or cabinet for harmful supplies _____

YES NO 19. Hair work stations clean and disinfected _____
YES NO 20. Nail work stations clean and disinfected _____
YES NO 21. Esthetics work stations clean and disinfected _____
YES NO 22. Waste Containers emptied at least daily _____
YES NO 23. Sinks clean and disinfected, no hair or soap scum _____
YES NO 24. Hand sanitizer or hand-washing facilities available for use _____

YES NO 25. Hair tools new and/or clean and disinfected _____
YES NO 26. Nail tools new and/or clean and disinfected _____
YES NO 27. Esthetics tools new and/or clean and disinfected _____
YES NO 28. All single-use items disposed after each use _____
YES NO 29. All products are clean, closed, and labeled correctly, includes wax _____
YES NO 30. Dispersal tools or equipment is used for products _____
YES NO 31. Electrical equipment clean and disinfected (electric clippers, electric files or curling irons) _____
YES NO 32. Attachments for electrical equipment clean and disinfected _____

YES NO 33. Private Residences – separate exit – separate from residential area _____
YES NO 34. Other laws and/or rules that apply (list) _____

D. List of Personal Licensees (first & last)

<u>Vera Cline</u>	Lic # _____	Expires: _____
	Lic # <u>CO-02515-2018</u>	Expires: <u>3-14-2018</u>
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____
	Lic # _____	Expires: _____

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E. Comments:

F.

Signature: [Signature] Date: 10-4-2018 Time: 1:00
Inspector signature: [Signature]
Licensee reviewed inspection report with Inspector YES NO (if "no" why not)

RECHECK _____

FAIL

Office
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PASS